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CONFIRMATION NO. 4387

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** CONTINUING DATA ****

This application is a CIP of 09/860,025 05/16/2001 PAT 6,743,332 *Boyle*

** FOREIGN APPLICATIONS ****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 03/09/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY WA	SHEETS DRAWING 2	TOTAL CLAIMS 27	INDEPENDENT CLAIMS 2
Verified and Acknowledged <i>C. Boyle</i>	Examiner's Signature Initials				

ADDRESS

28624
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TITLE

Refiner bleaching with magnesium oxide and hydrogen peroxide

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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